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August 16, 2005

Receiver: Examiner Ramy M. Osman
USPTO

FAX #: 571-273-8300

Sender: Mary Deaunlaire, Patent Secretary to:
DESMUND GEAN

Our Ref. No.: CISC208/3890
Appln No.: 09/872,989

Re: RCE and Amendment D

Pages Including Cover Sheet(s): 15

MESSAGE:

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Biederman et al.

Attorney Docket No.: CISC208/3890

Application No.: 09/872,989

Examiner: Osman, Ramy M.

Filed: June 1, 2001

Group: 2157

Title: APPARATUS AND METHODS FOR
COMBINING DATA**CERTIFICATE OF TRANSMISSION**

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner Ramy M. Osman at facsimile telephone number 571-273-8300 on August 16, 2005.

Signed: _____

Mary Deaunlaire

**REQUEST FOR CONTINUED EXAMINATION (RCE)
(37 CFR §1.114)**Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) of the above-identified application.

1. Submission required under 37 C.F.R. §1.114:

- a. ☐ Previously submitted
- i. ☐ Consider the amendment/reply under 37 C.F.R. §1.116 previously filed on _____.
(Any unentered amendment referred to above will be entered.)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- iii. ☐ Other _____.
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit/Declaration
- iii. ☐ Information Disclosure Statement with Form PTO-1449
☐ Copies of IDS Citations
- iv. ☐ Other _____.

08/18/2005 MBINAS 00000003 500388 09872989
01 FC:1801 790.00 DA**BEST AVAILABLE COPY**

2. Fees: *(The RCE fee is required at the time the RCE is filed.)***Fee Calculation (37 CFR §1.16)**

Fee for Request for Continued Examination Under 37 C.F.R. §1.17(e)	\$790 =	\$790.00
TOTAL		\$790.00
SMALL ENTITY 50% FILING FEE REDUCTION (if applicable)		

- ☐ a. Applicant hereby petitions for a _____ month extension of time.
- ☒ b. Applicant believes that no (additional) extension of time is required; however, if it is determined that such an extension is required, Applicant hereby petitions that such an extension be granted and authorizes the Director to charge the required fees for an extension of time under 37 CFR §1.136 to Deposit Account No. 500388.
- ☐ c. Enclosed is our Check No. _____ in the amount of \$790.00 to cover the RCE fee.
- ☒ d. The Director is authorized to charge any fees beyond the amount enclosed which may be required, or to credit any overpayment, to Deposit Account No. 500388 (Order No. CISC208)

3. ☒ Please continue to send correspondence to the following address:

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